# RULES

## OF

# TENNESSEE BOARD OF OSTEOPATHIC EXAMINATION DIVISION OF HEALTH RELATED BOARDS

#### **CHAPTER 1050-3**

# GENERAL RULES AND REGULATIONS GOVERNING THE UTILIZATION OF X-RAY OPERATORS IN OSTEOPATHIC PHYSICIANS' OFFICES

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**1050-3-.01 DEFINITIONS.** As used in this Chapter of rules the following terms and acronyms will have the meaning ascribed to them:

- (1) A.R.R.T. American Registry of Radiologic Technologists.
- (2) Full Certification Certification obtained by submitting certification issued by the A.R.R.T. which will enable the holder to perform any and all procedures or functions in a physician's office.
- (3) Limited Certification Certification issued by the Tennessee Board of Osteopathic Examination which enables the holder to perform only those radiological procedures or functions intended for the body areas indicated on the issued certification, other than those procedures involving the administration of contrast media.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-9-101, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed August 23, 2001; effective November 6, 2001. Amendment filed October 2, 2002; effective December 16, 2002.

# 1050-3-.02 SCOPE OF PRACTICE.

- (1) Each person certified by the Board must practice only in the certified specialty areas contained on the certificate as issued or upgraded and only for the types of radiographs specified in these rules. Practicing radiography beyond the scope of certification is grounds for decertification.
- (2) Board issued certificates shall be posted in a location visible to all patients receiving radiographic examinations.
- (3) Certificates issued by the Board are subject to being disciplined for the same causes, to the same extent and pursuant to the same procedures as issued medical licenses.
- (4) A.R.R.T. certificate-holders are fully certified and may perform any and all radiographic procedures or functions in a physician's office that are within the American Society of Radiologic Technologists' scope of practice for radiographers.
- (5) Under no circumstances may a person with limited certification perform any procedure utilizing contrast media or any invasive radiological procedure.
- (6) Under no circumstances may a person with limited certification perform any procedure utilizing CT (Computer-assisted Tomography) or Fluoroscopy (including C-Arm units).

(Rule 1050-3-.02, continued)

(7) Certification pursuant to these rules does not authorize the certificate holder to perform MRI (Magnetic Resonance Imaging) or Ultrasound procedures, both of which are beyond the scope and capabilities of limited licensed operators.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-9-101, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed August 23, 2001; effective November 6, 2001. Amendment filed August 29, 2003; effective November 12, 2003.

**1050-3-.03 CERTIFICATION REQUIREMENTS AND EXEMPTIONS.** All persons operating x-ray machines in osteopathic physicians' offices in Tennessee must possess a certificate issued by the Board pursuant to this Chapter of rules with the exception of the following who are exempted from certification.

- (1) Licensed osteopathic physicians
- (2) Osteopathic interns, residents and clinical fellows
- (3) Students engaged in clinical practice while enrolled in a Board approved radiological education course required to receive radiological certification
- (4) Graduates of a Board-approved radiological education course who are awaiting examination but only for a period not to exceed six (6) months from the date that the course was completed. After sitting for the examination this exemption shall continue for a period not to exceed seventy-five (75) days. At all times while awaiting examination or examination results and until certification is received, graduates shall practice only under supervision as set forth in subparagraph 1050-3-.07 (2)(c).
- (5) Individuals who
  - (a) have worked under the supervision of a physician (D.O. or M.D.) for at least ten of the past fifteen years prior to the effective date of this rule, practicing radiography of the chest, extremities, and/or spine, and can provide documentation of same; and
  - (b) have documentation of satisfactory completion of a Board-approved training course excluding the course required supervised clinical hours and excluding the passing of required state examination.
  - (c) will be issued a certificate from the Tennessee Board of Osteopathic Examination verifying their work and education experience. This provision is available to eligible applicants only until one year after the effective date of the rule.
- (6) Individuals who possess a current X-ray operator's certificate issued by the Tennessee Board of Medical Examiners.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-9-101, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed July 27, 2000; effective October 10, 2000. Amendment filed August 23, 2001; effective November 6, 2001.

## 1050-3-.04 QUALIFICATIONS FOR FULL AND LIMITED CERTIFICATION.

- (1) Certification areas: Limited certification is available from the Board in the following specific specialty areas:
  - (a) Chest
  - (b) Extremities
  - (c) Skull AP/PA and Lateral Skull Only, and Sinuses
  - (d) Spine
  - (e) Bone densitometry
- (2) Unless otherwise qualified pursuant to paragraph (3) of this rule, to be eligible for a limited or full radiological certification, a person must meet the following minimum qualifications:
  - (a) Be at least eighteen (18) years of age; and
  - (b) Possess a high school diploma or a GED certificate; and
  - (c) Submit two (2) original letters of recommendation to attest to good moral character;
  - (d) Be free from physical or mental impairment which would interfere with the performance of duties or otherwise constitute a hazard to the health and safety of patients; and
  - (e) Cause to have submitted verification of attendance and successful completion of a Board-approved radiological certification training course for the type of certification sought pursuant to Rule 1050-3-.07(2) or cause to be submitted verification of A.R.R.T. certification; and
  - (f) Have successfully completed the Board-approved examination pursuant to Rule 1050-3-.08 or possess an A.R.R.T. certificate; and
  - (g) Cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's certification application materials, the result of a criminal background check; and
  - (h) Have made application for certification pursuant to Rule 1050-3-.05 and paid all fees.
- (3) Any person who holds a radiological certificate issued by another state obtained pursuant to standards and procedures substantially equivalent to the standards set by these Rules may receive a certification at an appropriate level at the Board's discretion.
- (4) Any person who holds a certification issued by the A.R.R.T. who meets the qualifications of paragraph (2) of this rule may receive full certification from the Board.
- (5) Any person who now holds a limited certification issued by the Board may receive limited certification upgrade in bone densitometry without compliance with the provisions of part 1050-3-.07 (2) (b) 2.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-9-101, 63-9-111, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed August 23, 2001; effective November 6, 2001. Amendment filed August 29, 2003; effective November 12, 2003. Amendment filed March 14, 2006; effective May 28, 2006.

### 1050-3-.05 OBTAINING AND UPGRADING FULL AND LIMITED CERTIFICATION.

# (1) Initial Certification

(a) An applicant shall obtain an application form from the Board Administrative Office, respond truthfully and completely to every question or request for information contained in the form and submit it along with all documentation and fees required by the form and this rule that all steps necessary to accomplish the filing of the required documentation be completed prior to filing an application and that all documentation be filed simultaneously.

## (b) For Limited Certification

- 1. An applicant shall cause to be submitted from the radiological educational course director to the Board Administrative Office certification of successful completion of any course(s) required by paragraph 1050-3-.07 (2) which shall include certification from the supervising physician(s) of successful completion of the required clock hours of clinical training for each separate area of specialty certification requested.
- 2. An applicant shall submit the Application and Certification Fee as provided in Rule 1050-3-.06(1); and the State Regulatory Fee as provided in Rule 1050-3-.06(3). Limited certification requires only these fees unless limited certification is extended into other areas at a later time.
- 3. An applicant shall submit a notarized copy of an official high school diploma or a GED certificate indicating the applicant's educational attainment.
- 4. An applicant shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's certification application materials, the result of a criminal background check.
- 5. Applicants applying pursuant to Rule 1050-3-.04(3) need only submit the following:
  - (i) The application form; and
  - (ii) A certificate of fitness or endorsement from the states in which the applicant holds certification; and
  - (iii) A copy of all documents necessary to show the educational and professional requirements for certification in all states in which the applicant holds certification, and
  - (iv) A clear, recognizable, recently taken bust photograph which shows the full head, face forward from at least the top of the shoulder up; and
  - (v) The Application and Certification Fee as provided in Rule 1050-3-.06(l) and the State Regulatory Fee as provided in 1050-3-.06(3).

### (c) For Full Certification

- An applicant shall cause to be submitted documentation of issuance of A.R.R.T. or A.R.C.R.T. certification directly from the issuing agency to the Board's Administrative Office.
- 2. An applicant shall pay the application and certification fee and the state regulatory fee provided by rule 1050-3-.06 (1) and (3).

(Rule 1050-3-.05, continued)

- 3. An applicant shall submit a clear, recognizable, recently taken bust photograph which shows the full head, face forward from at least the top of the shoulder up.
- 4. An applicant shall cause to be submitted to the Board's administrative office directly from the vendor identified in the Board's certification application materials, the result of a criminal background check.
- (2) Upon approval for issuance of certification, the Board shall issue a certificate which contains either the specific radiological limitations as reflected by the application materials received or full certification.
- (3) Upgrading Limited Certification Persons holding limited certifications may upgrade their certification by submitting a written request along with their original certificate to the Board Administrative Office and complying with the following:
  - (a) Having the director of a Board approved specialty area(s) radiological education course(s) submit directly to the Board Administrative Office documentation indicating the additional clock hours and type of education received as required by rule 1050-3-.07(2)(b) and (c) along with certification from the supervising physician(s) of successful completion of the clock hours of clinical training for each separate area in which certification is sought.
  - (b) Have submitted proof of successful completion of all examinations required by Rule 1050-3-.08.
  - (c) The original certification will be amended indicating all appropriate certification areas and returned to the applicant.
- (4) Application review and decisions shall be governed by paragraphs (1) through (6) and paragraph (9) of Rule 1050-2-.05.

Authority: T.C.A. §§4-3-1011, 4-5-202, 4-5-204, 63-9-101, 63-9-111, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed August 23, 2001; effective November 6, 2001. Amendment filed August 29, 2003; effective November 12, 2003. Amendment filed March 14, 2006; effective May 28, 2006.

**1050-3-.06 FEES.** The following fees are nonrefundable and apply to all applicants and certificate holders. All fees may be paid in person, by mail or electronically by cash, check, money order, or by credit and/or debit cards accepted by the Division of Health Related Boards. If the fees are paid by certified, personal or corporate check they must be drawn against an account in a United States Bank, and made payable to the Tennessee Board of Osteopathic Examination.

(1) Application and Certification Fee - To be paid by all applicants at the time an application is filed.

Limited Certification	\$ 50.00
Full Certification	\$ 50.00

(2) Biennial Certification Renewal Fee - To be by paid all persons holding certification in any radiological area.

Limited Certification	\$ 50.00
Full Certification	\$ 50.00

(Rule 1050-3-.06, continued)

(3) State Regulatory Fee - To be paid upon application and annually thereafter to be collected at biennial renewal from all certificate holders.

\$ 5.00 (\$10.00 biennially)

(4) Late Certification Renewal Fee - To be paid when a certificate holder fails to timely renew a certification.

\$ 100.00

Authority: T.C.A. §§4-3-1011, 4-5-202, 4-5-204, 63-1-107, 63-9-101, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed September 17, 2002; effective December 1, 2002. Amendment filed December 4, 2003; effective February 17, 2004.

# 1050-3-.07 EDUCATIONAL COURSE APPROVAL AND CURRICULUM FOR LIMITED CERTIFICATION.

- (1) Course approval
  - (a) To be approved to provide limited radiological certification training the educational course director must obtain Board approval by submitting the following information to the Board Administrative Office:
    - 1. Location of the course; and
    - Names of physicians, A.R.R.T. technologists, physicists, or other work qualified personnel who are acting as instructors. Individuals with just a limited radiological certification, without further credentials that this rule allows or the Board feels uniquely qualifies them to instruct students in a particular subject, may not under any circumstances teach or otherwise provide limited radiological certification training; and
    - 3. Course description and curriculum.
  - (b) If the substance of the requirements in subparagraph (1) (a) changes the course provider must submit, within fifteen (15) days of the change, a new request for course approval. Course approval may be withdrawn for failure to timely submit the new request and/or for changes that result in the course no longer meeting the requirements of subparagraph (1) (a).
  - (c) To remain approved to provide limited radiological certification training the educational course director must obtain Board approval every two (2) years by submitting the information required in subparagraph (1) (a).
- (2) The following curriculum is mandatory for all limited certification education programs and course approval shall be based upon the level of radiological education obtainable through the program courses according to the following:
  - (a) Basic Course Defined as the core, theory or foundation education basic to radiography. The basic course is prerequisite to any specialty area certification except bone densitometry, but needs to be successfully completed only once. The basic radiological course shall include, but not be limited to, imaging equipment, principles or radiographic exposure, radiation protection, radiographic quality and radiographic film processing. This course shall consist of fifty (50)

(Rule 1050-3-.07, continued)

clock hours. Successful completion of this course may be substituted for the bone densitometry course required in part (2) (b) 2.

## (b) Specialty Areas

- 1. Chest, extremities, skull, sinus, spine Defined as the study of radiography of a particular anatomical part including human structure and function, radiographic positioning and procedures, and evaluation of radiographs. Each specialty area course shall consist of ten (10) clock hours.
- 2. Bone Densitometry Defined as the core, theory or foundation education basic to operation of bone densitometry equipment. This course shall include, but not be limited to: radiation protection and safety, principles of exposure of bone densitometry scanning machines, patient care, and anatomy of long bones and spine, including construction of bone, destruction of bone, and measurement of bone mass. This specialty area course shall consist of twenty-four (24) clock hours.

# (c) Clinical Training

- 1. Chest, extremities, skull, sinus, spine Defined as "hands-on" observation and participation in the production of diagnostic radiographs. Clinical training must be supervised by either a residency-trained radiologist, or by a licensed physician in conjunction and consultation with a fully-certified and registered operator (A.R.R.T. technologist) with at least three (3) years experience when appropriate.
  - (i) This training shall consist of at least sixty (60) clock hours for each specialty area in which certification is sought; and
  - (ii) The educational course provider, through a radiologist or fully-certified radiologic technologist, is responsible for determining, by use of a board-approved guideline, whether a student has the necessary clinical skills to gain entrance to the certification examination(s). With justification and documentation thereof, the educational course provider may extend the length of the clinical training for a reasonable period of time beyond the minimum sixty (60) clock hours to accomplish the responsibility placed upon it by this rule.
- 2. Bone Densitometry Clinical bone scanning training must be supervised by a either a residency-trained radiologist, or by a licensed physician in conjunction and consultation with a registered or certified bone densitometry operator with at least three (3) years experience when appropriate.
  - (i) All applicants must have machine specific training according to the following:
    - (I) The applicant must receive training on the same type machine that (s)he will be operating.
    - (II) This machine-specific training may be done by the manufacturer (or authorized representative) or by a person certified in Bone Densitometry and who has received machine-specific training by the manufacturer on the appropriate machine.
    - (III) The machine-specific training shall include, but not be limited to: Identification of machine components; Operation of machine; Exposure doses for various scans from the machine; Positioning for each scan

(Rule 1050-3-.07, continued)

procedure; Adjusting for errors; Image Acquisitions; Reference Databases; Quality Control Procedures.

(ii) All manufacturers or their authorized representatives and all persons holding bone densitometry certification who conduct any training under this rule must issue a training certificate to the applicant, to include the name and credentials of the trainer, the description of the machine used for training, and the length, scope, and dates of the training.

## (d) Specialty areas defined

1. Chest - includes visceral thorax only; routine projections are PA, AP, Lateral, Oblique, Decubitus, and Apical Lordotic.

### 2. Extremities

- (i) Upper Extremity includes the fingers up through the humerus including the shoulder joint, clavicle, scapula and the A/C joint.
- (ii) Lower Extremity includes the toes up through the femur including routine unilateral hip joint views, but not the pelvis.
- 3. Skull/Sinus AP/PA and Lateral Skull only, and routine Sinus projections of upright PA/Caldwell, Lateral, and Waters.
- 4. Spine includes AP/PA, Lateral, and Oblique cervical views; AP/PA and Lateral (excluding Breathing Lateral) thoracic views; AP/PA Lateral and Oblique lumbar views; AP/PA, Lateral, and Oblique sacral and sacroiliac views; AP/PA and Lateral coccyx views.
- (3) Course approval may be withdrawn if the Board finds the course is in violation of any of its statutes or regulations or if the Board finds the course inadequate for certification purposes based upon random auditing of the course and/or its effectiveness in producing qualified graduates. The minimum standard for continued course approval shall be based upon at least a sixty-five percent (65%) graduate pass rate for first time takers on the examinations over at least a six (6) month period.
- (4) The Board of Osteopathic Examination's designee may issue course approval subject to subsequent Board ratification.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-9-101, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Amendment filed August 23, 2001; effective November 6, 2001. Amendment filed May 28, 2003; effective August 11, 2003. Amendment filed August 29, 2003; effective November 12, 2003.

## 1050-3-.08 EXAMINATION FOR CERTIFICATION.

- (1) Full Certification A.R.R.T. certification will substitute for all examinations required by the Board and will be the basis for full certification.
- (2) Limited Certification

(Rule 1050-3-.08, continued)

- (a) Chest, extremities, skull, sinus, spine The Board adopts as its certification examination all limited scope examinations and the general core examination provided by the A.R.R.T. Applicants for these specialty area certifications must successfully complete the following examinations or their identified successor examinations:
  - 1. The A.R.R.T. core examination: and
  - 2. The limited scope examination(s) for the area(s) in which certification is sought.
  - 3. No applicant shall be allowed access to the limited certification examination(s) until clinical competency has been certified in writing, signed by the supervisor who provided the training pursuant to rule 1050-3-.07 (2) (c).
- (b) Bone Densitometry All applicants must provide proof of having successfully completed the A.R.R.T.'s Bone Densitometry Equipment Operators Examination.
- (3) Applicant Responsibilities
  - (a) It is the applicant's responsibility to apply directly to the examination agency for admission to the examinations. The Board does not process applications for examination.
  - (b) It is the applicant's responsibility to attach the training certificate and the certified passing test results to the application for certification.
- (4) An applicant will be deemed to have successfully completed any of the examinations required for certification upon correctly answering sixty-five percent (65%) of all questions contained on the examinations which the Board or its' designee deem to be appropriate and applicable to the type(s) of certification(s) sought.
- (5) After the fourth (4<sup>th</sup>) unsuccessful attempt at passing any section of the examination, the applicant may no longer participate in supervised limited radiography. No certificate will be issued until the exam is successfully completed and the applicant shows documentation of repeating a Board-approved course or completing an acceptable remedial program provided by a Board-approved Course Provider, and
- (6) Nothing in the Rule shall prohibit certification course instructors from examining students as they deem necessary; or from defining terms for successful completion of courses for their own purposes.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-9-101, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed August 23, 2001; effective November 6, 2001. Amendment filed May 28, 2003; effective August 11, 2003. Amendment filed August 29, 2003; effective November 12, 2003.

## 1050-3-.09 RENEWAL, RETIREMENT AND REACTIVATION.

- (1) Renewal All certificate holders must renew their certificates to be able to legally continue in practice. Renewal is governed by the following:
  - (a) The due date for renewal is its expiration date which is the last day of the month in which a certificate holder's birthday falls pursuant to the Division of Health Related Boards "biennial birthdate renewal system" contained in rule 1200-10-1-.10.
  - (b) Methods of Renewal Renewal may be accomplished by one (1) of the following methods:

(Rule 1050-3-.09, continued)

1. Internet Renewals - Individuals may apply for renewal and pay the necessary fees via the Internet. The application to renew can be accessed at:

### www.tennesseeanytime.org

- 2. Paper Renewals Certificate holders who have not renewed their authorization online via the Internet, will have a renewal application form mailed to them at the last address provided by them to the Board prior to the expiration date of their current certificate. Failure to receive such notification does not relieve the individual of the responsibility of timely meeting all requirements for renewal. To be eligible for renewal a certificate holder must submit to the Division of Health Related Boards on or before the certificate's expiration date the following:
  - (i) A completed and signed renewal application form.
  - (ii) The renewal and state regulatory fees as provided in Rule 1050-3-.06.
- (c) Any renewal application received after the expiration date but before the last day of the month following the expiration date must be accompanied by the Late Certification Renewal Fee provided in Rule 1050-3-.06.
- (d) Any individual who fails to comply with the renewal rules and/or notifications sent to them concerning failure to timely renew shall have their certificate processed pursuant to rule 1200-10-1-.10.
- (e) Anyone submitting a signed renewal form, electronically or otherwise, which is found to be fraudulent or untrue may be subject to disciplinary action.
- (f) Any certificate holder who receives notice of failure to timely renew pursuant to rule 1200-10-1-.10, and who, on or before the last day of the month following the month in which the certificate expires, executes and files in the Board's administrative office an affidavit of retirement pursuant to paragraph (2) of this rule may have their certificate retired effective on their certificate's expiration date.

## (2) Certificate Retirement

- (a) Certificate holders who wish to retain their certification but not actively practice will not be required to comply with the certification renewal process by doing the following:
  - 1. Obtain from, complete and submit to the Board Administrative Office an affidavit of retirement form.
  - Submit any documentation which may be required by the form to the Board Administrative Office.
- (b) Upon successful application for retirement of certification with completion and receipt of all proper documentation to the Board's satisfaction, the Board shall register the certificate as retired. Any person who has a retired certificate may not practice in Tennessee.
- (3) Reactivation Any certificate holder whose certificate has been retired or processed pursuant to rule 1200-10-1-.10 for failure to timely renew may re-enter active practice by doing the following:

(Rule 1050-3-.09, continued)

- (a) Submit a written request for a Reactivation Application to the Board Administrative Office; and
- (b) Fully complete and submit the Board's Reactivation Application along with:
  - 1. For those reactivating a retired certificate:
    - (i) Payment of renewal and state regulatory fees as provided in rule 1050-3-.06; and
    - (ii) Verification of continuing education compliance pursuant to rule 1050-3-.12.
  - 2. For those who are reactivating a certificate processed pursuant to rule 1200-10-1-.10 for failure to timely renew:
    - (i) Payment of all accumulated past due renewal and state regulatory fees and the late certification renewal fee; and
    - (ii) Verification of continuing education compliance pursuant to rule 1050-3-.12.
- (c) If requested, after review by the Board, a designated Board member, or the Board's consultant appear before either the Board, a Board member, or the Board Designee for an interview regarding continued competence in the event of certification retirement, certification expiration or other practice inactivity in excess of two (2) years and meet such other requirements the Board feels necessary to establish current levels of competency.
- (4) Anyone submitting a signed reactivation form or other documentation which is found to be untrue may be subjected to disciplinary action as provided in T.C.A. § 63-9-111.
- (5) Renewal issuance and reactivation decisions pursuant to this rule may be made administratively subject to review by the Board, any Board member or the Board Designee.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-1-107, 63-9-101, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed August 23, 2001; effective November 6, 2001. Amendment filed October 2, 2002; effective December 16, 2002.

# 1050-3-.10 SUPERVISION.

- (1) Before any person certified under this chapter of rules is authorized to perform any x-ray procedure or operate any x-ray equipment in a physician's office, the physician shall place a copy of the person's renewal certificate in the person's personnel file to prove the person being authorized has the appropriate certification required for either or both the procedure being performed and/or the equipment being used and that such certification is current.
- (2) The employing physician(s), or a physician designated by the employing physician(s) as a substitute supervisor, shall exercise close supervision and assume full control and responsibility for the services provided by any person certified under this chapter of rules employed in the physician(s') practice. That supervision, control and responsibility, except when it involves contrast imaging or involves sedation, does not require the physical presence of the physician(s) at all times at the site where the services are being provided. However, it does require that the physician(s) have his/her primary medical practice physically located within the boundaries of the state of Tennessee and that he/she be capable of being physically present at the site where the services are being provided within a reasonable time depending upon the type of x-ray being performed and the severity of the medical complications that may arise from that type of x-ray.

(Rule 1050-3-.10, continued)

**Authority:** T.C.A. §§4-5-202, 4-5-204, 63-9-101, and 63-9-112. **Administrative History:** Original rule filed January 28, 2002; effective April 13, 2002. Repeal and new rule filed March 14, 2006; effective May 28, 2006.

## 1050-3-.11 RESERVED.

## 1050-3-.12 CONTINUING EDUCATION.

- (1) Continuing Education Hours Required.
  - (a) Each person certified by the Board must biennially attend and complete twenty (20) hours of radiological related continuing education in courses approved by the Board.
  - (b) The Board approves courses for only the number of hours contained in the course. The approved hours of any individual course will not be counted more than once in a two (2) year period toward the required hourly total regardless of the number of times the course is attended or completed by any individual certification holder.
- (2) Continuing Education Proof of Compliance
  - (a) The due date for proof of attendance and completion of the required continuing education hours is each certificate holder's biennial renewal due date.
  - (b) Each person must, on a Board provided form, check a box and/or enter signature which indicates attendance and completion of the required continuing education hours and that such hours were obtained during the preceding two (2) calendar years.
  - (c) Each person must retain proof of attendance and completion of all continuing education courses. This documentation must be retained for a period of four (4) years from the end of the calendar year in which the course is completed. This documentation must be produced for inspection and verification, if requested in writing by the Board during its verification process.
- (3) Continuing Education Course Approval
  - (a) Courses to be offered for credit toward the required continuing education hours must, unless otherwise provided, receive prior approval from the Board.
  - (b) Prior approval of a course may be obtained by submitting the following information to the Board Administrative Office at least thirty (30) days prior to the scheduled date of the course.
    - 1. a course description or outline.
    - names of all lecturers.
    - 3. brief resume of all lecturers.
    - 4. number of hours of education credit requested.
    - 5. date of courses.
    - 6. copies of materials to be utilized in the course.
    - 7. how verification of attendance is to be documented.
  - (c) Continuing education courses may be presented in any of the following formats:

(Rule 1050-3-.12, continued)

- 1. Lecture
- Audiovisual with successful completion of a written post experience examination to evaluate material retention.
- Correspondence with successful completion of a written post experience examination to evaluate material retention.
- 4. Any combination of the above.
- (d) The following courses need not receive prior approval and shall constitute Board approved continuing education courses:
  - 1. Courses sponsored or approved by any of the following organizations:
    - (i) Tennessee Society of Radiologic Technologists
    - (ii) Tennessee Osteopathic Medical Association
    - (iii) American Medical Association
    - (iv) American Society of Radiologic Technologists
  - 2. Courses accepted by the American Registry of Radiologic Technologists.
  - 3. Educational courses sponsored by an accredited school of medicine or radiological health. If such course is taken for or assigned quarter or semester credit hours, three (3) quarter hours or equivalent semester hours shall be equivalent to fifteen (15) continuing education hours. No credits will be counted for courses failed.
- (e) Individual Board members and the Board's designee are vested with the authority to approve continuing education courses submitted in compliance with this rule. All such approvals must be presented to the full Board for ratification.

### (4) Violations

- (a) Any person who falsely attests to attendance and completion of the required hours of continuing education may be subject to decertification.
- (b) Any person who fails to obtain the required continuing education hours may be subject to decertification.
- (c) Education hours obtained as a result of compliance with the terms of an informal settlement of Board Orders in any disciplinary action shall not be counted toward the continuing education hours required to be obtained by Rule 1050-3-.12.

Authority: T.C.A. §§4-5-202, 4-5-204, 63-9-101, and 63-9-112. Administrative History: Original rule filed November 27, 1990; effective January 11, 1991. Repeal and new rule filed July 31, 1995; effective October 13, 1995. Amendment filed August 23, 2001; effective November 6, 2001.